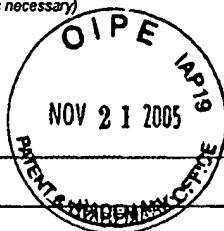


Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)



Sheet 1 of 1

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

PTO/SB/08A(10-01)
Approved for use through 10/31/2002. OMB 051-0031
US Patent & Trademark Office, U.S. DEPARTMENT OF COMMERCE

Complete if Known *

Application Number	09/933,845
Filing Date	August 21, 2001
First Named Inventor	VAN DE SLUIS, Bartel
Group Art Unit	2153
Examiner Name	Barqadle, Yasin

Attorney Docket No: 2167.003US1

US PATENT DOCUMENTS

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Filing Date if Appropriate
YB	US2003/0097338	05/22/2003	Mankovich, N., et al.	02/03/2000
YB	US-4,030,119	06/14/1977	Ellis, George W.	10/01/1975
YB	US-4,857,899	08/15/1989	Ishii, Takatoshi	12/10/1986
YB	US-4,992,706	02/12/1991	Troemel, Stephen T., et al.	02/21/1990
YB	US-6,078,301	06/20/2000	Arai, Ikuya, et al.	05/10/1996

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	T*
YB	DE-DE 44 27 046 C2	02/01/2001	Goldschneier, Daniel, et al.	

OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T*
YB		DEANE, E., "International Search Report", PCT, (08/23/2000), 4 pages	

EXAMINER

DATE CONSIDERED

12/21/05

Substitute Disclosure Statement Form (PTO-1449)

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. Applicant's unique citation designation number (optional). Applicant to place a check mark here if English language Translation is attached.